PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004									Ar	Application or Docket Number			
CLAIMS AS FILED - PART					•			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
U.	U.S. NATIONAL STAGE FEES			(Goldmin 1)		(Column 2)	٦.	2175	T	7	. OMALI	. ENTITY	
-	BASIC FEE			SMALL ENT. = \$ 150			4	RATE	FEE	_	RATE	FEE	
EX	EXAMINATION FEE			Satisfies PCT Article 33(1)-		GE ENT. = \$ 300 other situations =	4	BASIC FEE		OR	BASIC FEE	364	
\vdash				(4) = \$50/\$100 U.S. is ISA = \$50/\$100		\$ 100 / \$ 200	1	EXAM. FEE		_	EXAM. FEE	Holle	
SEARCH FEE			ALL	ALL other countries = \$200 / \$400		ther situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	41.16	
FEE FOR EXTRA SPEC. PGS.			1.	minus 100 =		/ 50 ≐	1	X \$ 125 =	 	-	V # 050	IWW	
TOTAL CHARGEABLE CLAIMS			10	7 minus 20 =		-	┨			-	X \$ 250 =	ļ	
INDEPENDENT CLAIMS				minus 3 =	<u> </u>	· · · · · · · · · · · · · · · · · · ·	+	X \$ 25 =	 	OR	X \$ 50 =	ļ	
MULTIPLE DEPENDENT CLAIM PRE			PECENT		*		-	X \$ 100 =	<u> </u>	OR	X \$ 200 =		
				•]	+ \$ 180 =	· .	OR	+ \$ 360 =		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		
·	CLAIMS AS AMENDED - PART (Column 1)							SMALL E	ENTITY	OR	OTHER SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER '	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	•	=		X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ \$ 180 =		OR				
,							٠	TOTAL ADDIT.		L	+ \$ 360 = TOTAL ADDIT.		
								FEE		I OK	FEE		
		(Column 1) CLAIMS		(Colum HiGHE		(Column 3)			·				
		REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		 RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**				X \$ 25 =		OR	X \$ 50 =		
	Independent	*	Minus	***	•	-	.	X \$ 100 =		OR -	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					ŀ	+ \$ 180 =		-				
							Ļ	TOTAL ADDIT.		ᇉ	+ \$ 360 = OTAL ADDIT.		
						•		FEE		OR '	FEE		
***	the "Highest Nun	nber Previously Paid nber Previously Paid	Fot" IN T Fot" IN T	olumn 2, write "0" in c HIS SPACE is less th HIS SPACE is less th I or Independent) is th	nan '20',	enter "20".	I the	appropriate box in	n column 1.				

FORM PTO-875 (Rev. 02/2005)